

SUSAN WILLIAMS SCANN, ESQ.
Nevada Bar No. 000776
**DEANER, DEANER, SCANN,
MALAN & LARSEN**
720 South Fourth Street, Suite #300
Las Vegas, Nevada 89101
(702) 382-6911
Attorneys for Copper Sage Commercial Center, LLC

E-Filed on: 10/14/09

**UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF NEVADA**

In re:

USA COMMERCIAL MORTGAGE
COMPANY,

Debtor,

Case No. BK-S-06-10725 LBR
Case No. BK-S-06-10726 LBR
Case No. BK-S-06-10727 LBR
Case No. BK-S-06-10728 LBR
Case No. BK-S-06-10729 LBR

In re:

USA CAPITAL REALTY ADVISORS, LLC,

Debtor,

Chapter 11
Jointly Administered Under
Case No. BK-S-06-10725 LBR

In re:

USA CAPITAL DIVERSIFIED TRUST DEED
FUND, LLC,

Debtor,

Date of Hearing: N/A
Time of Hearing: N/A

Affects:

In re:

USA CAPITAL FIRST TRUST DEED FUND,
LLC,

Debtor,

☒ USA Commercial Mortgage Company
☒ USA Capital First Trust Deed Fund, LLC
☐ USA Realty Advisors, LLC
☐ USA Securities, LLC
☐ USA Capital Diversified Trust Deed Fund, LLC

In re:

USA SECURITIES, LLC,

Debtor.

☐ All Debtors

WITHDRAWAL OF PROOF OF CLAIM

COMES NOW, the Claimant, COPPER SAGE COMMERCIAL CENTER, LLC ("COPPER SAGE"), by and through its attorney, SUSAN WILLIAMS SCANN, ESQ. of the law firm of DEANER, DEANER, SCANN, MALAN & LARSEN, and hereby withdraws its Amended Proof of

1 Claim filed November 13, 2006, in the above-entitled bankruptcy case. A copy of the Amended
2 Proof of Claim is attached.

3 DATED: 10/13/09.
4

Respectfully Submitted,

5 DEANER, DEANER, SCANN,
6 MALAN & LARSEN

7 

8 SUSAN WILLIAMS SCANN, ESQ.
9 Nevada Bar No. 000776
10 720 South Fourth Street, Suite 300
11 Las Vegas, Nevada 89101
12 Attorneys for Copper Sage Commercial Center LLC
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CERTIFICATE OF MAILING

I hereby certify that service of the Withdrawal of Proof of Claim was made on 14
October, 2009, by depositing a copy of the same in the United States mail in Las Vegas, Nevada,
postage-prepaid, addressed to the following:

USA Commercial Mortgage
4484 S. Pecos Rd.
Las Vegas, NV 89121

U.S. Trustee
300 Las Vegas Blvd., S., Ste., 4300
Las Vegas, NV 89101

Rob Charles, ESQ.
Susan M. Freeman, ESQ.
Lewis and Roca LLP
3993 Howard Hughes Pkwy., Suite 600
Las Vegas, NV 89169

Alan B. Diamond
Diamond McCarthy LLP
Two Houston Center
909 Fannin Street, Suite 1500
Houston, TX 77010


Employee of DEANER, DEANER, SCANN,
MALAN & LARSEN

F:\OFFICE\CLIENTS\Robert Russell Entities\Copper Sage II\Docs\Withdrawal of Proof of Claim.wpd

PROOF OF CLAIM

Name of Debtor:

USA Commercial Mortgage Company

Case Number:

06-10725-LBR

E-Filed On 11/13/06

See Reverse for List of Debtors and Case Numbers.
This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.

Name of Creditor and Address:

COPPER SAGE COMMERCIAL CENTER LLC
Attn: Robert A. Russell
P. O. Box 28216
Scottsdale, AZ 85255

☐ Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.

☐ Check box if you have never received any notices from the bankruptcy court or BMC Group in this case.

☐ Check box if this address differs from the address on the envelope sent to you by the court.

DO NOT FILE THIS PROOF OF CLAIM FOR A SECURED INTEREST IN A BORROWER THAT IS NOT ONE OF THE DEBTORS.

If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.

THIS SPACE IS FOR COURT USE ONLY

Creditor Telephone Number 480) 505-4048

Last four digits of account or other number by which creditor identifies debtor:

Copper Sage Commercial Center Phase II

Check here if this claim

☐ replaces or amends

a previously filed claim dated: 11/9/06

1. BASIS FOR CLAIM

☐ Goods sold

☐ Personal injury/wrongful death

☐ Retiree benefits as defined in 11 U.S.C. § 1114(a)

☐ Unremitted principal

☐ Services performed

☐ Taxes

☐ Wages, salaries, and compensation (fill out below)

☐ Other claims against service (not for loan balances)

☐ Money loaned

☒ Other (describe briefly)

Last four digits of your SS #: _____

Breach of Contract, Intentional Misrepresentation and other theories.

2. DATE DEBT WAS INCURRED: April 2006

3. IF COURT JUDGMENT, DATE OBTAINED:

4. CLASSIFICATION OF CLAIM. Check the appropriate box or boxes that best describe your claim and state the amount of the claim at the time case filed.

See reverse side for important explanations.

UNSECURED NONPRIORITY CLAIM \$3,500,000.00

☒ Check this box if: a) there is no collateral or lien securing your claim, or b) your claim exceeds the value of the property securing it, or c) none or only part of your claim is tied to priority.

U. SECURED PRIORITY CLAIM

☐ Check this box if you have an unsecured claim, all or part of which is entitled to priority.

Amount entitled to priority \$ _____

Specify the priority of the claim:

☐ Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B)

☐ Wages, salaries, or commissions (up to \$10,000)*, earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(4).

☐ Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5).

SECURED CLAIM

☐ Check this box if your claim is secured by collateral (including a right of setoff).

Brief description of collateral:

☐ Real Estate ☐ Motor Vehicle ☐ Other _____

Value of Collateral: \$ _____

Amount of arrearage and other charges at time case filed included in secured claim, if any: \$ _____

☐ Up to \$2,225* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(7).

☐ Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).

☐ Other - Specify applicable paragraph of 11 U.S.C. § 507(a) (____).

* Amounts are subject to adjustment on 4/1/07 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

5. TOTAL AMOUNT OF CLAIM AT TIME CASE FILED: \$ 3,500,000.00

(unsecured)

(secured)

(priority)

(Total)

\$3,500,000.00

☐ Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.

6. CREDITS: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.

7. SUPPORTING DOCUMENTS: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.

8. DATE-STAMPED COPY: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

The original of this completed proof of claim form must be sent by mail or hand delivered (FAXES NOT ACCEPTED) so that it is actually received on or before 5:00 pm, prevailing Pacific time, on November 13, 2006 for each person or entity (including individuals, partnerships, corporations, joint ventures, trusts and governmental units).

BY MAIL TO:
BMC Group
1. USACM Claims Docketing Center
2. Box 911
El Segundo, CA 90245-0911

BY HAND OR OVERNIGHT DELIVERY TO:
BMC Group
Attn: USACM Claims Docketing Center
1330 East Franklin Avenue
El Segundo, CA 90245

THIS SPACE FOR COURT USE ONLY

DATE

11/13/06

SIGN and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any).

Robert A. Russell

U.S. Bankruptcy Court

District of Nevada

Notice of Electronic Claims Filing

The following transaction was received from SCANN, SUSAN on 11/13/2006 at 5:02 PM PST

Case Name: USA COMMERCIAL MORTGAGE COMPANY
Case Number: 06-10725-lbr
Creditor Name: COPPER SAGE COMMERCIAL CENTER LLC
P. O. BOX 28216
Scottsdale, AZ 85255
Claim Number: Amended 792 Claims Register
Total Amount Claimed: \$3500000.00

The following document(s) are associated with this transaction:

Document description: Main Document

Original filename: F:\OFFICE\CLIENTS\Bob Russell Entities\Copper Sage I\Amended POC.pdf

Electronic document Stamp:

[STAMP bkecfStamp_ID=989277954 [Date=11/13/2006] [FileNumber=7483768-0]
] [31533a75d639d130b68cf3772e9da1c057dd6a4830279c34a14a6766a0446bc12ae
affe8b7d964aa2e1e89eb51b806f883155e2ea54cd787bbc99d1989aa4d35]]

06-10725-lbr Notice will be electronically mailed to:

FRANKLIN C. ADAMS franklin.adams@bbklaw.com, arthur.johnston@bbklaw.com

NANCY L ALLF nallf@parsonsbehle.com,
klawrence@parsonsbehle.com;tthomas@parsonsbehle.com;ecf@parsonsbehle.com

FRANK A. ANDERSON anderson.frank@pbgc.gov, efile@pbgc.gov

OGONNA M. ATAMOH oatamoh@nevadafirm.com,
bkecf@nevadafirm.com;paltstatt@nevadafirm.com;sliberio@nevadafirm.com

KERIANN M ATENCIO ATENCIOK@GTLAW.COM

BMC GROUP, INC. evrato@bmcgroup.com, ecf@bmcgroup.com;jmiller@bmcgroup.com;jbartlett@bmcgroup.com

KELLY J. BRINKMAN kbrinkman@goldpatterson.com

THOMAS R BROOKSBANK tom@tombrooksbank.com, renee@tombrooksbank.com

ANDREW M. BRUMBY abrumby@shutts-law.com, rhicks@shutts-law.com;lmackson@shutts-law.com

MATTHEW Q. CALLISTER mqc@callister-reynolds.com, maggie@callister-reynolds.com

CANDACE C CARLYON ltreadway@sheacarlyon.com,
ccarlyon@sheacarlyon.com;bankruptcyfilings@sheacarlyon.com;rsmith@sheacarlyon.com

ROB CHARLES rcharles@lrlaw.com, cjordan@lrlaw.com

MICHAEL W. CHEN yvette@ccfirm.com

KEVIN B. CHRISTENSEN kbchrislaw@aol.com

JANET L. CHUBB tbw@jonesvargas.com

Name of Debtor:

USA Commercial Mortgage Company

Case Number:

06-10725-LBR

E-Filed On 11/9/06

See Reverse for List of Debtors and Case Numbers.
This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.

Name of Creditor and Address:

COPPER SAGE COMMERCIAL CENTER LLC

Attn: Robert A. Russell

P. O. Box 28216

Scottsdale, AZ 85255

Creditor Telephone Number (480) 505-4048

Last four digits of account or other number by which creditor identifies debtor:

Copper Sage Commercial Center Phase II

☐ Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.

☐ Check box if you have never received any notices from the bankruptcy court or BMC Group in this case.

☐ Check box if this address differs from the address on the envelope sent to you by the court.

DO NOT FILE THIS PROOF OF CLAIM FOR A SECURED INTEREST IN A BORROWER THAT IS NOT ONE OF THE DEBTORS.

If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.

THIS SPACE IS FOR COURT USE ONLY

BASIS FOR CLAIM

☐ Goods sold☐ Personal injury/wrongful death☐ Services performed☐ Taxes☐ Money loaned☒ Other (describe briefly)

Breach of Contract

☐ Retiree benefits as defined in 11 U.S.C. § 1114(a)☐ Wages, salaries, and compensation (fill out below)

Last four digits of your SS #: _____

Unpaid compensation for services performed from: _____ to _____

☐ Unremitted principal☐ Other claims against servicer (not for loan balances)

DATE DEBT WAS INCURRED: April 2006

3. IF COURT JUDGMENT, DATE OBTAINED:

CLASSIFICATION OF CLAIM. Check the appropriate box or boxes that best describe your claim and state the amount of the claim at the time case filed.
See reverse side for important explanations.

UNSECURED NONPRIORITY CLAIM \$3,500,000.00

Check this box if: a) there is no collateral or lien securing your claim, or b) your claim exceeds the value of the property securing it, or if c) none or only part of your claim is entitled to priority.

SECURED PRIORITY CLAIM

Check this box if you have an unsecured claim, all or part of which is entitled to priority.

Amount entitled to priority \$ _____

Specify the priority of the claim:

Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B)

Wages, salaries, or commissions (up to \$10,000)*, earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(4).

Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5).

SECURED CLAIM

☐ Check this box if your claim is secured by collateral (including a right of setoff).

Brief description of collateral:

☐ Real Estate ☐ Motor Vehicle ☐ Other _____

Value of Collateral: \$ _____

Amount of arrearage and other charges at time case filed included in secured claim, if any: \$ _____

☐ Up to \$2,225* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(7).

☐ Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).

☐ Other - Specify applicable paragraph of 11 U.S.C. § 507(a) (_____).

* Amounts are subject to adjustment on 4/1/07 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

TOTAL AMOUNT OF CLAIM \$ 3,500,000.00

AT TIME CASE FILED:

(unsecured)

(secured)

(priority)

(Total)

Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.

CREDITS: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.

SUPPORTING DOCUMENTS: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.

DATE-STAMPED COPY: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

The original of this completed proof of claim form must be sent by mail or hand delivered (FAXES NOT ACCEPTED) so that it is actually received on or before 5:00 pm, prevailing Pacific time, on November 13, 2006 for each person or entity (including individuals, partnerships, corporations, joint ventures, trusts and governmental units).

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BMC Group
1: USACM Claims Docketing Center
2: Box 911
Segundo, CA 90245-0911

BY HAND OR OVERNIGHT DELIVERY TO:
BMC Group
Attn: USACM Claims Docketing Center
1330 East Franklin Avenue
El Segundo, CA 90245

THIS SPACE FOR COURT USE ONLY

SIGN and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any):